SENDER: COMPLETE THIS SECTION COMPLETE THIS SECTION ON DELIVERY A. Signature Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ☐ Agent Print your name and address on the reverse ☐ Addressee so that we can return the card to you. B. Received by (Printed Name) C. Date of Delivery Attach this card to the back of the mailpiece, or on the front if space permits. le delivery address different from item 1. Article Addressed to: □ No If YES, enter delivery address below: NANCY SMITH APR 1 0 2014 N&J ASSOCIATES 16578 OAKMOOR PL PARKER CO 80134 Service Types Certified Mail® Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery EB 4-4-14 5/047/01/3 4. Restricted Delivery? (Extra Fee) ☐ Yes 2. Article Number 7011 2970 0001 8828 1467 (Transfer from service label) PS Form 3811, July 2013 Domestic Return Receipt

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PS Form 3800, August 2006

See Reverse for Instructions

Certified Mail Provides:

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- For an additional fee, a Return Receipt may be requested to provide proof of delivery. To obtain Return Receipt service, please complete and attach a Return Receipt (PS Form 3811) to the article and add applicable postage to cover the fee. Endorse mailpiece "Return Receipt Requested". To receive a fee waiver for a duplicate return receipt, a USPS® postmark on your Certified Mail receipt is required.
- For an additional fee, delivery may be restricted to the addressee or addressee's authorized agent. Advise the clerk or mark the mailpiece with the endorsement "Restricted Delivery".
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PS Form 3800, August 2006 (Reverse) PSN 7530-02-000-9047